

## STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

RECEIVED

JAN 3 0 2019

I.	Name	01	Lobt	yistts	5):

Paul A. Worsowicz; Heidi L. Kroll

				101,
II. Name of Lobbyist	's partnership, firm or co	orporation, if any:		NEW HAMPSHIRE DEPARTMENT OF STATE
	GALLAGI	HER, CALLAHAN &	& GARTRELL, P.C.	
	214 No	rth Main Street, Con	cord, NH 03301	
603-228		603-226-3334	wors	owicz@gcglaw.com
(Telepl	none)	(Fax)		(Email)
	overs: (Choose one – file ansactions which are not			ny file a separate report for
X Ali reportable	transactions occurring in th	e month prior to the r	eporting date relative to	the following client.
		LIFE COPING,		
	(Full Name of Client a	s it appears on the Lol	obyist Registration Form	)
	transactions by the lobbyis y particular client.	t (including the lobby	ist's family), or the lobb	ying firm listed below which are
IV. Date of Report:	April 25, 2018		July 25, 2	018
•	ctivity from date of registr	ation to 3/31/18	activity from 4/1/1	
	_	_		
	October 31, 2018 D			0, 2019 🗵
	activity from 7/1/18 to 9/3	30/18	activity from 10/1/	18 to 12/31/18
	to fees received and no re complete just this form and			
VI Check if addition	nal reports are attached:			
If you have see	eived fees or made expend	litures, you must file A	Addendum A - Fees and	Expenses
If you have paid an honorarium or reimbursed expenses, you must file Addendum B – Report of Honorariums or Expense Reimbursement				
		e political contribution	ns, you must file Adden	dum C – Political Contributions
		l hereby swear or affu	m that the foregoing info	ormation is true and complete
Carl M	dorsowe _		1-24-19	7
(Signature of Lobbyi				(Date)
(Signature of Poopy)	() ()			(Dute)
Paul A. Worsowicz				
(Print Name of lobby	rist)			



## STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Paul A. Worsowicz; Heidi L. Kroll				
II. Name of lobbyist's partnership, firm or corporation, if any:		·		
GALLAGHER, CALLAHAN & GARTRE	LL, P.C.			
(Name of partnership, firm or corporati		·		
III. Name of Client LIFE COPING, INC.	Date Janu	ary 30, 2019		
IV. Fees Received Indicate the gross amount of all fees received from the client identified above lobbying, including fees for services such as public advocacy, government relaincluding research, monitoring legislation, and related legal work. The gross to by any expenses:	ations, or public i	relations services,		
a) Total of all fees received in this reporting period	a) \$	4,875.00		
b) Total of all fees received this calendar year, prior to this reporting period. (This should equal the total prior monthly reports for this calendar year.)	b) \$	14,725.00		
c) Total of all fees received to date. (Add lines a and b)	c) \$	19,600.00		
d) Indicate the amount of any such fees that are due, but have not yet been paid.	d) \$	.00		
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses:  (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.				
<ul> <li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li> <li>b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.</li> </ul>	a) \$ b) \$	4,875.00		
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	.00_		

d) Total expenses for this reporting period.  (Add lines a, b and c.)	d) \$	4,875.00
e) Total of expenses paid this calendar year, prior to this reporting period.  (This should be the amount on line f of addendum A for last month's report.)	e) \$	14,725.00
f) Total of all expenses year to date.	f) \$	19,600.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbyin period, including by whom paid or to whom charged.	g fees during this	reporting
Paid to:	Am	ount
	<u>\$</u>	
	<b>š</b>	
	\$	
	\$	
	\$	
***************************************		
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that is true and complete to the best of my knowledge and belief.	the foregoing in	ıformation
Signature of lobbyist)	/-24-/9 (Date)	
(Signature of lobbyist)	(Date)	
Paul A. Worsowicz (Print Name of Lobbyist)		

Lobbyist Fees & Expenses, Addendum A - Page 2 Client: LIFE COPING, INC.

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying	partnership, firm or corpo	ration: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.
Name of Client (lea particular client):	ive blank if Statement is for Life Coping, Inc.	or the partnership, firm, or co	orporation and not related to any
Date of Report (che	eck one):		
April 25, 2018 🗖	July 25, 2018 🗆	October 31, 2018	January 30, 2019 🔀
		e Statement of Income and E atement (insert the number o	expenses described above, and the f Addendum forms being
1 Addendum A	(s).		
0 Addendum B	(s).		
_0 Addendum C(	(s).		
	ffirm that the foregoing in t of my knowledge and be		and each Addendum is true and
(Signature of Lobb	Kroll evist)		1 25 2019 (Date)
	7131)		(Duto)
Heidi L. Kroll			·
(Print Name of lob	obvist)		